

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/147,970	03/23/99	370	2731	34248/DBP

**APPLICANT** SIGRAM SCHINDLER, BERLIN, FED REP GERMANY; ANDREAS ILLG, BERLIN, FED REP GERMANY; KARSTEN LUDTKE, BERLIN, FED REP GERMANY; FRANK PAETSCH, BERLIN, FED REP GERMANY.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\* *None*  
VERIFIED

*hwy*  
\*\*371 (NAT'L STAGE) DATA\*\*\*\*\* *yes*  
VERIFIED THIS APPLN IS A 371 OF PCT/DE97/02363 10/07/97  
*hwy*

**\*\*FOREIGN APPLICATIONS\*\*\*\*\* *yes***  
VERIFIED FED REP GERMANY 196 42 063.6 10/07/96  
FED REP GERMANY 196 45 368.2 10/23/96  
*hwy*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 05/27/99 \*\* SMALL ENTITY \*\*

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY DEX	SHEETS DRAWING 6	TOTAL CLAIMS 33	INDEPENDENT CLAIMS 2
Verified and Acknowledged <i>hwy</i> Examiner's Initials _____ Initials _____					

**ADDRESS**  
D BRUCE PROUT  
CHRISTIE PARKER & HALE  
PO BOX 7068  
PASADENA CA 91109-7068

**TITLE**  
METHOD FOR TRANSMITTING DATA IN A TELECOMMUNICATIONS NETWORK AND SWITCH FOR IMPLEMENTING SAID METHOD

FILING FEE RECEIVED  \$820	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 147970	RECEIPT DATE:	03 / 23 / 99
IA NUMBER:	PCT/ DE97 / 02363	IA FILING DATE:	10 / 07 / 97
FAMILY NAME:	SCHINDLER	DELAY WAIVED (Y/N):	Y
GIVEN NAME:	SIGRAM	DEMAND RECEIVED (Y/N):	Y
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	10 / 07 / 96
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	34248/DBP	COUNTRY:	DEX
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	TELEPHONE	
		FAX	

NAME: D BRUCE PROUT  
CHRISTIE PARKER & HALE  
STREET: PO BOX 7068

CITY: PASADENA  
STATE/COUNTRY: CA ZIP: 911097068  
EMAIL:

APPLICATION TITLES:

METHOD FOR TRANSMITTING DATA IN A TELECOMMUNICATIONS NETWORK AND  
SWITCH FOR IMPLEMENTING SAID METHOD

TAB TO LAST POSITION,PUSH SEND